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Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2011

Department of the Treasury
Internal Revenue Service

For calendar year 2011 or other tax year beginning **JUL 1, 2011**, and ending **JUN 30, 2012**

Open to Public Inspection for
501(c)(3) Organizations Only

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

D Employer identification number (Employees' trust, see instructions)

B Exempt under section
 501(c)(3))
 408(e) 220(e)
 408A 530(a)
 529(a)

Print or Type

MASS ASSOC. OF 766 APPROVED PRIVATE SCH.

04-2718662

Number, street, and room or suite no. If a P.O. box, see instructions.

607 NORTH AVENUE, DOOR 15

E Unrelated business activity codes (See instructions)

City or town, state, and ZIP code

WAKEFIELD, MA 01880

900004

C Book value of all assets at end of year
2,005,320.

F Group exemption number (See instructions.)

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. **MEMBERSHIP COST SAVINGS PROGRAMS**

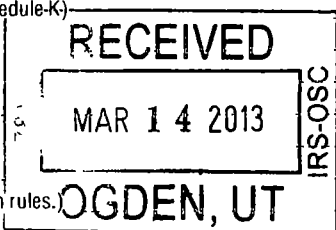
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **KRISTEN BROWN** Telephone number **(781) 245-1220**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances	c Balance			
2 Cost of goods sold (Schedule A, line 7)				
3 Gross profit. Subtract line 2 from line 1c				
4a Capital gain net income (attach Schedule D)				
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)				
c Capital loss deduction for trusts				
5 Income (loss) from partnerships and S corporations (attach statement)		-36,892.	STMT 1	-36,892.
6 Rent income (Schedule C)				
7 Unrelated debt-financed income (Schedule E)				
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)				
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)				
10 Exploited exempt activity income (Schedule I)		78,180.	52,691.	25,489.
11 Advertising income (Schedule J)		7,560.	20,928.	-13,368.
12 Other income (See instructions, attach schedule.)				
13 Total. Combine lines 3 through 12		48,848.	73,619.	-24,771.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)
(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule-K)	14
15 Salaries and wages	15
16 Repairs and maintenance	16
17 Bad debts	17
18 Interest (attach schedule)	18
19 Taxes and licenses	19
20 Charitable contributions (See instructions for limitation rules.)	20
21 Depreciation (attach Form 4562)	21
22 Less depreciation claimed on Schedule A and elsewhere on return	22a
23 Depletion	23
24 Contributions to deferred compensation plans	24
25 Employee benefit programs	25
26 Excess exempt expenses (Schedule I)	26
27 Excess readership costs (Schedule J)	27
28 Other deductions (attach schedule)	28
29 Total deductions. Add lines 14 through 28	29 0.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30 -24,771.
31 Net operating loss deduction (limited to the amount on line 30)	31 0.
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32 -24,771.
33 Specific deduction (Generally \$1,000, but see instructions for exceptions.)	33 1,000.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34 -24,771.



3

Part III Tax Computation

35 Organizations Taxable as Corporations See instructions for tax computation

Controlled group members (sections 1561 and 1563) check here See instructions and:

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) \$ (2) \$ (3) \$

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34

35c 0.

36 Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 34 from:

Tax rate schedule or Schedule D (Form 1041)

36

37 Proxy tax. See instructions

37

38 Alternative minimum tax

38

39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies

39 0.

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

40a

b Other credits (see instructions)

40b

c General business credit. Attach Form 3800

40c

d Credit for prior year minimum tax (attach Form 8801 or 8827)

40d

e Total credits. Add lines 40a through 40d

40e

41 Subtract line 40e from line 39

41 0.

42 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)

42

43 Total tax. Add lines 41 and 42

43 0.

44 a Payments: A 2010 overpayment credited to 2011

44a 1,528.

b 2011 estimated tax payments

44b

c Tax deposited with Form 8868

44c

d Foreign organizations: Tax paid or withheld at source (see instructions)

44d

e Backup withholding (see instructions)

44e

f Credit for small employer health insurance premiums (Attach Form 8941)

44f

g Other credits and payments: Form 2439

44g

Form 4136 Other Total

45 Total payments. Add lines 44a through 44g

45 1,528.

46 Estimated tax penalty (see instructions). Check if Form 2220 is attached

46

47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed

47

48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid

48 1,528.

49 Enter the amount of line 48 you want: Credited to 2012 estimated tax 1,528. Refunded

49 0.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2011 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and

Yes No

Financial Accounts. If YES, enter the name of the foreign country here

X

2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file

X

3 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A

1 Inventory at beginning of year

1

6 Inventory at end of year

6

2 Purchases

2

7 Cost of goods sold Subtract line 6

7

3 Cost of labor

3

from line 5 Enter here and in Part I, line 2

4a Additional section 263A costs

4a

8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?

Yes No

b Other costs (attach schedule)

4b

X

5 Total Add lines 1 through 4b

5

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

Date 12-27-13

EXECUTIVE DIRECTOR

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check if self-employed

PTIN

JOHN G. MADDEN

Signature

2-26-13

P00142526

Firm's name LEONARD, MULHERIN & GREENE, P.C.

Firm's EIN 04-3108635

625 GROVE STREET

Firm's address BRAINTREE, MA 02184

Phone no. (781) 356-4800

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

(1)			
(2)			
(3)			
(4)			
2 Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)	
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)		
(1)			
(2)			
(3)			
(4)			
Total 0.		Total 0.	
(c) Total income Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	
▶ 0.		▶ 0.	

Schedule E - Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 8)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals ▶			0.	0.
Total dividends-received deductions included in column 8			▶ 0.	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1 Name of controlled organization	2 Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7 Taxable income	8. Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals ▶			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization
(see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals	0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income
(see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1) ADMINISTRATIO						
(2) N FEES/DUES	78,180.	52,691.	25,489.			
(3)						
(4)						
Totals	78,180.	52,691.				0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	0.	0.				0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) MAAPS SPECIAL						
(2) EDUCATION						
(3) RESOURCE						
(4) BULLETIN	7,560.	20,928.	-13,368.			
(5) Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	7,560.	20,928.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	1
DESCRIPTION		AMOUNT	
LIMITED PARTNERSHIPS INVESTMENT LOSS		-36,892.	
TOTAL TO FORM 990-T, PAGE 1, LINE 5		-36,892.	

FORM 990-T	SCHEDULE I - EXPENSES DIRECTLY CONNECTED WITH PRODUCTION OF UNRELATED BUSINESS INCOME	STATEMENT	2
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
MISCELLANEOUS		52,691.	
- SUBTOTAL -	1		52,691.
TOTAL OF FORM 990-T, SCHEDULE I, COLUMN 3			52,691.

Massachusetts Association of 766 Approved Private Schools, Inc.

EIN 04-2718662

Summary of Limited Partnership Interests

June 30, 2012

<u>Investment</u>	<u>PAL C/O 06/30/11</u>	<u>UBTI Per K-1</u>	<u>Cumulative PAL C/O 06/30/12</u>	<u>FY 2012 PAL Income (Loss)</u>	<u>PAL C/O 06/30/12</u>
Atlas Energy, LP	-	(286)	(286)	-	(286)
Chesapeake Midstream Partners, LP	-	(3,023)	(3,023)	-	(3,023)
Copano Energy, LLC	(3,425)	(830)	(4,255)	(4,255)	-
Crosstex Energy, LP	-	(1,160)	(1,160)	-	(1,160)
CVR Partners, LP	-	217	217	217	-
El Paso Pipeline Partners, LP	(1,846)	(2,152)	(3,998)	-	(3,998)
Energy Transfer Equity, LP	-	(7,309)	(7,309)	-	(7,309)
Enterprise Products Partners, LP	(7,738)	(3,945)	(11,683)	-	(11,683)
Genesis Energy, LP	-	(1,291)	(1,291)	-	(1,291)
Inergy LP	(10,345)	(509)	(10,854)	(10,854)	-
Linn Energy, LLC	-	(2,988)	(2,988)	-	(2,988)
LRR Energy, LP	-	(80)	(80)	-	(80)
Magellan Midstream Partners, LP	(283)	40	(243)	-	(243)
Markwest Energy Partners, LP	-	(838)	(838)	-	(838)
Plains All American Pipeline, LP	(2,102)	130	(1,972)	(1,972)	-
QR Energy, LP	(35)	(598)	(633)	(633)	-
Regency Energy Partners, LP	(17,586)	(1,809)	(19,395)	(19,395)	-
Rentech Nitrogen Partners, LP	-	(677)	(677)	-	(677)
Targa Resources Partners, LP	(6,128)	(4,131)	(10,259)	-	(10,259)
Western Gas Partners, LP	(359)	(593)	(952)	-	(952)
Total	(49,847)	(28,523)	(78,370)	(36,892)	(41,478)

PAL- Passive Activity Loss

PAL C/O-Passive Loss carried to future period

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions MASS ASSOC. OF 766 APPROVED PRIVATE SCH.	Employer identification number (EIN) or <input checked="" type="checkbox"/> 04-2718662
	Number, street, and room or suite no. If a P O box, see instructions 607 NORTH AVENUE, DOOR 15	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code For a foreign address, see instructions WAKEFIELD, MA 01880	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

KRISTEN BROWN

• The books are in the care of **607 NORTH AVENUE, DOOR 15 - WAKEFIELD, MA 01880-1302**

Telephone No **(781) 245-1220**

FAX No

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **MAY 15, 2013**.

5 For calendar year _____, or other tax year beginning **JUL 1, 2011**, and ending **JUN 30, 2012**

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return

Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0.
c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature

Title **EXECUTIVE DIRECTOR**

Date